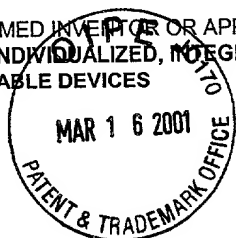


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
UTILITY PATENT APPLICATION TRANSMITTAL

PATENT  
Total Pages \_\_\_\_\_

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: Kurt R. Linberg, James D. Webb, JoAnn Abraham  
TITLE: INDIVIDUALIZED, INTEGRATED AND INFORMATIVE INTERNET PORTAL FOR HOLISTIC MANAGEMENT OF PATIENTS WITH IMPLANTABLE DEVICES



CERTIFICATE UNDER 37 CFR §1.10. I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Box Patent Application, Assistant Commissioner of Patents, Washington, D.C. 20231, "EXPRESS No. EL844550309US, on this 15TH day of MARCH, 2001.

1060 U.S. PTO

FRAYDA M. NITSCHKE

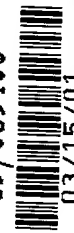


Printed Name

Signature

03/15/01

1046 U.S. PTO  
09/809483



Assistant Commissioner for Patents  
BOX PATENT APPLICATION  
Commissioner of Patents and Trademarks  
Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

- X Patent Application Transmittal  
X Specification:  
Total pages: 45 (including claims and abstract: Spec. 41 sheets; Claims 3 sheets; Abstract - 1  
X Drawings:

Total sheets: 85

☐ formal ☒ informal

X Combined Declaration and Power of Attorney: (UNSIGNED)

- ☐ newly executed  
☐ copy from prior application  
Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))  
x Incorporation by Reference - The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

X Accompanying application parts:

- ☐ Notification of filing a  
☐ Assignment of the Invention to Medtronic, Inc.  
☐ Assignment cover sheet  
☐ Information Disclosure Statement  
☐ PTO Form 1449  
☐ Copies of IDS citations  
☐ Preliminary Amendment  
☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.  
X Return Postcard

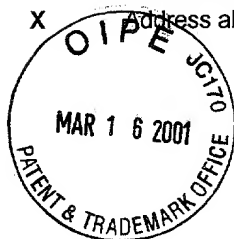
IF A CONTINUING APPLICATION:

- ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)  
of prior application No. \_\_\_\_ / \_\_\_\_\_.  
☐ Amend the specification by inserting before the first line the sentence: This application is a ☐ continuation  
☐ division ☐ continuation in part of application number \_\_\_\_\_, filed \_\_\_\_\_.  
☐ Cancel in this application original claims \_\_\_\_\_ of the prior application before calculating the filing fee.  
(At least the original independent claim must be retained for filing purposes.)  
☐ The prior application is assigned of record to Medtronic, Inc.  
☐ The Power of Attorney in the prior application is to: \_\_\_\_\_.

X This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) 60/189,562, filed MARCH 15, 2000..

X Address all future correspondence to:

GIRMA WOLDE-MICHAEL, Reg. No. 36,724  
**Medtronic, Inc.**, MS 301  
7000 Central Avenue NE  
Minneapolis, Minnesota 55432  
phone: (763)514-6402



**FEE**


**CALCULATION**

	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	21	20	= 1	x 18	18
Independent Claims	3	3	= 0	x 80	0
Multiple Dependent Claims	0			+ 270	0
Basic Filing Fee					710
TOTAL					<b>728</b>

Charge Deposit Account No. 13-2546 the sum of \$728.00 (Filing Fee) for a total of **\$728.00.**

The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546.. A duplicate of this transmittal is enclosed.

Date 03/15/01

  
GIRMA WOLDE-MICHAEL, Reg. No. 36,724  
MEDTRONIC, INC.  
7000 Central Avenue N.E.  
Minneapolis, Minnesota 55432  
Telephone: (763) 514-6402